



City of Rochester
Building Safety Department
2122 Campus Dr SE
Rochester MN 55904-4744
Phone: (507) 281-6133
Fax: (507) 287-2224
www.rochestermn.gov

GRADING Permit Application

Office Use Only

(4/03)

App. No. _____

Date _____ Tenant/Building Name _____

Site Address _____
Number Street Suite/Unit No.

Subdivision and/or Addition	Block	Lot	Plat	Parcel

Applicant is: ☐ Owner ☐ Contractor ☐ Other (describe) _____

Property Owner

Name _____ Phone (____) _____
Last First MI

Address _____

City _____ State _____ Zip Code _____

Contractor

Company _____ Phone (____) _____

Name _____ Roch. Contr. No. _____
Last First MI

Address _____

City _____ State _____ Zip Code _____

Engineer/ Designer

Company _____ Phone (____) _____

Name _____ Registration No. _____
Last First MI (State of MN)

Address _____

City _____ State _____ Zip Code _____

Description of Work _____

No. of Cubic Yards _____
(Excavation or fill, whichever is greater)

I hereby apply for a grading permit, and I certify that the information above is complete and accurate. The work will be in conformance with applicable laws of the State of Minnesota and ordinances of the City of Rochester, including City Sales and Use Tax Ordinance 129.25. I understand this is not a permit but only an application for a permit and work is not to start without a permit. I certify that the work will be in accordance with all permit conditions and approved plans (in the case of work which requires a review and approval of plans).

Applicant's Signature _____

Date _____

DO NOT WRITE BELOW THIS LINE – Office Use Only

(11/94)

ZONING REVIEW COMMENTS

☐ Site Plan Zoning District _____ Flood Protection Required _____
☐ Surveyor's Certificate Flood District _____ Flood Protection Elev. _____

Comments: _____

Zoning Approved by: _____ Date: _____

SUBMITTAL INFORMATION

☐ Drawings
☐ Soils Investigation
☐ Certification Required?
☐ _____

FEE PARAMETERS

Calculated Valuation \$ _____
☐ Plan Check Fee
☐ Permit Fee
☐ Investigative Fee
☐ Zoning Fee
☐ _____

**APPLICATION TRACKING
APPROVALS REQUIRED**

☐ Planning & Zoning
☐ Building Division
☐ Public Works
☐ _____
☐ _____

REQUIRED INSPECTIONS

☐ Special Inspections
☐ Final (Public Works)
☐ _____
☐ _____

Comments: _____

Permit Approved by: _____ Date: _____